\								Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECO										10	77)	726	10	
Effective October 1, 2001										is	10°	474	7	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR	OTHER THAN		
TO	OTAL CLAIMS	}	111					RATE	E	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 370.00		370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		. 91			X\$ 9:	=	019	OR	X\$18=		
ENEC	DEPENDENT C	LAIMS	7 minus 3 =		· ~			X42=		8 4 4	OR	X84=		
ML	ALTIPLE DEPE	NDENT CLAIM P	RESENT					+140=			OR	+280=	·	
* If the difference in column 1 is less than zero,					ter "0" in column 2					1189	ОЯ	TOTAL		
CLAIMS AS AMENDED - PART II									•			OTHER	THAN	
		(Column 1) CLAIMS	(Column 2)			(Column 3)	٠ -	SMAL	L E	NTITY	OR	SMALL	ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT			BER -	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	den .		•		X\$ 9=			OR	X\$18=		
	Independent	•	Minus	***		=		X42=	1		OR	X84=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=			OR	+280=		
				•	•		L	TOTA	AL			TOTAL	<u></u>	
	•	(Column 1)		(Colun	nn 2)	(Column 3)	A	VDDIT. FE	ΞL		OA,	ADDIT. FEE		
		CLAIMS		HIGH	EST	(Column 3)	Г	<u> </u>	-	ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID I	USLY	PRESENT EXTRA		RATE	ŀ	TIONAL FEE		RATE	TIONAL FEE	
	Total	· W	Minus	••		-31		X\$ 9=	۱		ОR	X\$18=		
	Independent	NTATION OF MI	Minus	ENDEM	CIAIM			X42=		·	OR	X84=		
نــا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=			OR	+280=		
						•	L	TOTA DOIT, FE		-	OR	/ YOYAL		
•	(Column 1) (Column 2) (Column 3)											ADDIT. PEER		
AMENDMENT C		CLAIMS REMAINING		HIGHEST NUMBER		PRESENT			•	ADDI-	ſ	<u> </u>	ADDI-	
		AFTER AMENDMENT		PREVIO PAID F		EXTRA	L	RATE	<u> </u>	TONAL FEE		RATE	TIONAL	
	Total		Minus	4///		. —		X\$ 9=	Ι		OR	X\$18=		
	Independent	• J	Minus	Sto ENDEAGE	3	-		X42=	Ť		OR	X84=		
لب	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=	T		OR	+280=		
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										F	TOTAL		
-	lihe "Highest Nu	mber Previously Pa	id For IN THE	S SPACE is	less than	3, enter "3."		ODIT. FEE				DDIT, FEE		
ī	ne righest Num	ber Previously Paid	ror (Total or	waspende	nų is the	riignest number	FOUN:	ន ស ណូ ថ	ppri	opriate box	in cok	imn 1.	1	